# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

## DOCUMENT# M21000011671

## Entity Name: COMARC MANAGEMENT, LLC

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **Current Principal Place of Business:**

10203 COLLINS AVENUE APT 1803N BAL HARBOUR, FL 33154

### **Current Mailing Address:**

100 QUENTIN ROOSEVELT BLVD STE 400 GARDEN CITY, NY 11530 US

## FEI Number: 26-3904366

#### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

COHEN, JEFFREY 10203 COLLINS AVE APT 1803N BAL HARBOUR, FL 33154 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Authorized Person(s) Detail :			
Title	MGRM	Title	AUTHORIZED REPRESENTATIVE
Name	COHEN, JEFFREY	Name	LAURA, BENDETTI
Address	10203 COLLINS AVENUE APT 1803N	Address	100 QUENTIN ROOSEVELT BLVD STE
City-State-Zip:	BAL HARBOUR FL 33154		400
		City-State-Zip:	GARDEN CITY NY 11530

SIGNATURE: LAURA BENDETTI AUTORIZED

REPRESENTATIVE

02/09/2024

FILED Feb 09, 2024 Secretary of State 0061480170CC

Date

Certificate of Status Desired: No

Date